



Dept. of Public Health & Human Services, Helena

Meeting Minutes

November 14, 2006

I. Call to order

Dennis Maier, MD called to order the regular meeting of the **State Trauma Care Committee** at **1130** on **November 14, 2006** in **Helena, MT**.

II. Roll call

Roll call was conducted and the following persons were present:

Present: Drs. Dennis Maier, Brad Pickhardt and, Jim Bentler, John Bleicher, Tim Sinton, Joe Hansen, Carol Kussman, Mike McGree, and Jay Pottenger
Drs. Dennis Maier and Jim Bentler attended via MetNet

Absent: Drs. Greg Moore, Charles Swannack, and Kirby Peden, William Taylor, Pauline Linnell

Guests: Richard Mickelson, Penny Clifton, Tracey Sinclair, Ron Martin, Kim Todd, Jennie Nemec, Bobbi Perkins, Don Whalen, Jim DeTienne, Bobbi Perkins, Rachelle Erickson, Justin Grohs, Sally Buckles, Lyndy Gurchiek, Gail Hatch, and Chad Landon.

III. Handouts

- Agenda
- August 14th meeting minutes
- Trauma Registry Report

IV. Approval of minutes from last meeting

The minutes from the last meeting were approved.

V. Open issues

a) Trauma System Update – Kim Todd

- The IHS (Indian Health Service) representative to the STCC position remains unfilled.
- Gail Hatch was introduced as the new Data Information Coordinator for the EMSTS.
- In the last quarter, the first two designation site visits in the State were conducted at Pioneer Medical Center and Livingston Healthcare. Designation requests have been received from American College of Surgeons (ACS) verified trauma centers Billings Clinic, Benefis Healthcare, Community Medical Center, and St. Vincent Healthcare.

- The MT TEAM Trauma course has been revised and updated with performance improvement and emergency preparedness added to each module. Support for this project has been obtained through a partnership with the HRSA grant funded MT Bioterrorism Training Project. The plan is to beta test the course in one location in each trauma region prior to February 2007.
- The goal in our inclusive trauma system is to be able to provide our medical facilities with a trauma consultation site visit to be followed by the TEAM Trauma course. Technical assistance is also available through EMSTS. The culmination would be a designation site visit enabling the facility to become a MT designated trauma facility.
- We have developed another partnership with the State HRSA funded hospital emergency preparedness program. This program is assisting in trauma facility preparation through a grant program awarded to individual facility's to aid them in developing a trauma program. For the facilities that have achieved this goal, the funding is to be used to prepare for surge capacity.
- The dates for the Advanced Trauma Life Support (ATLS) course for 2007 have been set. The locations will be in Billings, Great Falls and Missoula again. An ATLS instructor course is being planned for early 2007 to increase our number of instructors with a goal of providing 5 instead of 4 courses annually.

b) **EMS System Update** – Jim DeTienne

- The EMS Task Force met November 10th in Great Falls. Subcommittees were formed to address following four issues.
 - Funding and Policy
 - Recruitment and Retention
 - Data and Information – The online prehospital patient care report and licensing section of the Health Information Resource Management System (HIRMS) is in final testing and will be available soon. Progress is also being made on the Hospital Resource Information section of the program.
 - EMS Rules – The EMS rules were recently revised. This committee will take a more comprehensive look and start work on a major rewrite.
- The EMSTS continues to provide grant funded Automatic External Defibrillators (AED) program. Current legislation requires registration and a physician medical advisor to have an AED. Striking physician and allowing midlevel medical providers to provide oversight will be addressed in the next legislative session.
- **ACTION:** *Jim will stay abreast of and report on proposed legislation that will be of interest to this committee.* At this point, primary seatbelt, helmet use, and funding for poison control are anticipated.
- Sally Buckles suggested partnering with the Montana EMS Association (MEMSA) again this session to host a meet with your legislators evening to discuss EMS issues and the committee agreed. **ACTION:** *Sally will contact the Sergeant at Arms to arrange for a meeting around the next STCC meeting on February 12, 2007.* The two hospitals in Billings are hosting a meeting with legislators and Dr. Maeir has a two page report prepared to share. **ACTION:** *He agreed to share his information with the committee to assist them in similar endeavors.*

c) **Trauma Registry Report** – Jennie Nemec

The quarterly statewide trauma registry report was presented. The committee reviewed the data and provided Jennie with congratulations on the excellent work utilizing trauma registry data for performance improvement.

VI. Sub-committee Reports

a) Information Systems / Performance Improvement (Chairperson Brad Pickhardt)

The sub-committee reviewed the detailed trauma registry information prior to the main meeting and Jennie provided a summary PowerPoint presentation of the information at the main meeting. Trauma facility designation was reviewed and recommendations made to the Department for designation. Dr. Pickhardt voiced his concern again that this process is not optimal due to the limited amount of information given to the committee in order to make designation recommendations. The reason for this is the law state that any information used to determine designation is public record with no provision for confidentiality. This has been a major issue of contention and previously the STCC decided to give the process a try. **ACTION:** *Kim will continue to attempt to improve this process within the restraints of the current legislation and the committee agreed. Consideration will also be given to revising the legislation but this will not occur in the upcoming legislative session.*

b) Public Advocacy / Legislation (Chairperson Jim Bentler)

Jim requested an update on the progress towards obtaining Regional Trauma Coordinators. The role these positions could play and the budget was developed for the stakeholder meeting held this year. We learned during that meeting not to expect any increase in funding next year therefore in order to obtain these positions we will probably have to go before the legislature. This will not be attempted in the upcoming session; instead consideration is being given for the next session. In the interim efforts for public advocacy for the trauma system will be made including assistance with press releases for newly designated trauma facilities.

c) Education (Chairperson John Bleicher)

- This year's trauma system conference and the Rocky Mountain Rural Trauma Symposium (RMRTS) were a success. Next year the RMRTS will be hosted by the CRTAC and be held in Great Falls on September 6-7 with the system conference being held on the 5th. The committee identified the following topics to focus on in next year's system conference; performance improvement, inter-facility transfer and pediatric care issues.
- TEAM course revisions following the beta tests will be done at the next meeting with the goal of completion by April 1, 2007.
- There will be a midlevel medical provider trauma course offered for the first time in MT on April 20th in Missoula prior to Spring Fever trauma conference on April 21st.
- John attended a meeting in Fargo, ND of the trauma coordinators in MN, ND, and SD to evaluate the process and he found the meeting to be very helpful. Attendance was mostly trauma coordinators from Level I and II facilities and they discussed their trauma program issues, ACS verification, policies and education. It was agreed to try a similar type of meeting with the trauma coordinators in WY to be held in Billings on May 4, 2007.
ACTION: *Penny will identify a location, Kim will contact WY, and John will take the lead on the meeting particulars.*
- John requested the EMS survey results related to educational needs that was recently conducted by EMSTS **ACTION:** *Jim agreed to share the EMS survey results following summarization of responses.*

d) Organization / Emergency Preparedness (Chairperson Tim Sinton)

Last quarter Tim reported on a meeting held in Idaho with the Federal Emergency Management Association (FEMA) to discuss the formation of a Disaster Emergency Medical Assistance Team (DMAT) with Idaho. In October we received approval to initiate the formation of such a team.

This team could be used for a local response in our states or be called out for a disaster outside of our states. 100 people are needed and they must go through an approval process. Jennie is in charge of this process for EMSTS. **ACTION:** *Contact Jennie Nemec if you are interested in participating on the team and inform others of this opportunity.*

e) **Prevention / EMSC Oversight** (Chairperson Kirby Peden) Report by Bobbi Perkins

- Safe Kids has funded a national child safety seat advocate, Joe Colella to meet with physicians, hospital employees and public health departments to provide education on the topic.
- The committee will pursue facilitation of the Ride Smart program in an effort to reduce the number of horse related injuries.
- The EMSC oversight committee met today. Pediatric education and equipment purchases are being planned as well as looking at pediatric medical direction and transfer agreements.
- The Department is putting together a newsletter on prevention opportunities and the December issue will highlight motor vehicle crashes.
- Bobbi congratulated Tracey Sinclair on her work with the MT Indian nations in implementing the Think First program.

VII. RTAC Reports

a) **Western RTAC** given by John Bleicher

The WRTAC meeting was held on 10-13 and hosted by Saint Patrick Healthcare. There was no EMS meeting but the RN meeting was held and discussion on designation was held. Dissolving the EMS committee was discussed but rejected and efforts will be made to re-energize that committee. The discussion of trauma triage criteria was initiated and will continue at the next meeting. New officers were elected; Dr. Kristin Janczewski will be chairperson and Carolyn Bellemah secretary. Nine cases were reviewed.

- The next meeting will be January 12, 2007 hosted by Community Medical Center.

b) **Central RTAC** given by Tim Sinton

The CRTAC meeting was held on 10-26 and hosted by Benefis Healthcare. Planning has started on the RMRTS for next year. Other educational offerings have been Think First, PHTLS, and TNCC. Chester was identified as the location for the TEAM beta site in the central region. One case review was done and 15 people attended the meeting either in person or via tele-med link.

- The next meeting will be January 25, 2007 hosted by Benefis Healthcare.

c) **Eastern RTAC** given by Penny Clifton

The ERTAC was held on 9-7 and was hosted by St. Vincent's Healthcare. 18 people attended the meeting either in person or via tele-med link. Education held this quarter included Trauma System Conference, RMRTS, TEAM train the trainer course. Three TNCC provider courses and an instructor course are planned for next year. Discussion was initiated on developing guidelines for transfer of patients for neurosurgical care and will continue at the next meeting. The PI committee met prior and conducted three peer reviews. The injury prevention charter is under development and plan to meet at the next meeting with Think First and child safety seats the starting focus.

- The next meeting will be December 14, 2006 hosted by Billings Clinic.

VIII. Public Comment

None received.

IX. Adjournment

Chairman Dennis Maier adjourned the meeting at **1450**.

The **next State Trauma Care Committee** meeting will be held in Helena on **February 12, 2007**.
The annual Trauma Registrar meeting will follow on February 13, 2007.

Minutes respectfully submitted by: Kim Todd

Minutes approved:

ADDENDUM

Dr. Maier requested we plan discussion for the next meeting about insurance coverage for patients who were intoxicated when they were injured. Recently there have been patients for whom insurance has denied rehabilitation coverage due to the intoxication at the time of the injury. As Montana is not a no fault state, please research insurance coverage of costs incurred by intoxicated trauma patients at your facility prior to the next meeting.